

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:
My residence, post office address and citizenship are as stated below
next to my name, I believe I am the original, first and sole inventor
(if only one name is listed below) or an original, first and joint
inventor (if plural names are listed below) of the subject matter which
is claimed and for which a patent is sought on the invention entitled:

IMMUNOLOGICAL METHODS FOR THE TREATMENT OF GASTROINTESTINAL CANCER

the specification of which: (complete (a), (b) or (c) for type of application)

Regular or Design Application

- (a) _____ is attached hereto.
(b) X was filed on February 7, 1997 as Application
Serial No. 08/798,423 and was amended on
_____ (if applicable).

PCT Filed Application Entering National Stage
described and claimed in International Application

- (c) _____ was described and claimed in International Application
No. _____ filed on _____ and amended on
_____ (if any).

Acknowledgement of Review of Papers and Duty of Candor

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations § 1.56.

Priority Claim

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

- (d) X no such applications have been filed.
(e) — such applications have been filed as follows:

EARLIEST FOREIGN APPLICATION(S), IF ANY FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO SAID APPLICATION

| Country | Appl. No. | Date of Filing | Date of Issue | Priority Claimed |
|---------|-----------|----------------|---------------|------------------|
| | | | | () Yes () No |
| | | | | () Yes () No |
| | | | | () Yes () No |

ALL FOREIGN APPLICATION(S), IF ANY FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO SAID APPLICATION

| Country | Appl. No. | Date of Filing | Date of Issue | Priority Claimed |
|---------|-----------|----------------|---------------|------------------|
| | | | | () Yes () No |
| | | | | () Yes () No |
| | | | | () Yes () No |

I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States provisional application(s) listed below.

60/011,411
(Application Number)

02/08/96
(Filing Date)

(Application Number)

(Filing Date)

Continuation-in-Part

(complete this part only if this is a continuation-in-part application)
I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which occurred between the filing date of the prior application and the national or PCT International filing date of this application:

| (Application Serial No.) | (Filing Date) | (Status) | (patented, pending, |
|--------------------------|---------------|----------|---------------------|
|--------------------------|---------------|----------|---------------------|

Pow r of Attorney

As a named inventor, I hereby appoint Edward V. Filardi, Reg. No. 25,757; Nels Lippert, Reg. No. 25,888; Robert B. Smith, Reg. No. 28,538; David Bender, Reg. No. 35,445; Dimitrios Drivas, Reg. No. 32,218; Cecilia O'Brien Lofters, Reg. No. 33,434, Richard J. Sterner, Reg. No. 35,372; John Scheibeler, Reg. No. 35,346, Hans-Peter Hoffmann, Reg. No. 37,352, Scott T. Weingartner, Reg. No. 37,756 and Leslie Morioka, Reg. No. 40,304 the firm of WHITE & CASE, with offices at 1155 Avenue of the Americas, New York, New York 10036, as attorneys to prosecute this application and to transact all business in the Patent and Trademark office connected therewith.

SEND CORRESPONDENCE

TO: WHITE & CASE
Patent Department
1155 Avenue of the Americas
New York, NY 10036

DIRECT TELEPHONE CALLS TO:


Dimitrios T. Drivas, Esq.
WHITE & CASE
(212) 819-8286

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

| | | | |
|--|---|---|--------------------------------------|
| FULL NAME OF SOLE OR FIRST INVENTOR | Last Name GEVAS | First Name PHILIP | Middle Name C. |
| RESIDENCE | City HONOLULU, | State or Foreign Country HAWAII | Country of Citizenship USA |
| POST OFFICE ADDRESS | Post Office Address 487-A Portlock Rd., Honolulu, | City Hawaii | State or Country Hawaii |
| | | | Zip Code 96825 |

Date

5-20-97


Signature of Inventor

| | | | |
|---|--------------------------|------------------------|-------------------|
| FULL NAME OF SECOND JOINT INVENTOR, IF ANY | Last Name KARR | First Name STEPHEN | Middle Name L. |
| RESIDENCE City | State or Foreign Country | Country of Citizenship | |
| & CITIZENSHIP DAVIS, | CALIFORNIA | USA | |
| POST OFFICE Post Office Address | City | State or Country | Zip Code |
| ADDRESS 2265 HALSEY CIRCLE, | DAVIS | CALIFORNIA | 95616 |

Date _____

Signature of Inventor

| | | | |
|--|--------------------------|------------------------|-------------|
| FULL NAME OF THIRD JOINT INVENTOR, IF ANY | Last Name GRIMES | First Name STEPHEN | Middle Name |
| RESIDENCE City | State or Foreign Country | Country of Citizenship | |
| & CITIZENSHIP DAVIS | CALIFORNIA | USA | |
| POST OFFICE Post Office Address | City | State or Country | Zip Code |
| ADDRESS 551 RUTGERS DRIVE, | DAVIS | CALIFORNIA | 95616 |

Date _____

Signature of Inventor

| | | | |
|---|--------------------------|------------------------|-------------|
| FULL NAME OF FOURTH JOINT INVENTOR, IF ANY | Last Name MICHAELI | First Name DOV | Middle Name |
| RESIDENCE City | State or Foreign Country | Country of Citizenship | |
| & CITIZENSHIP LARKSPUR, CALIFORNIA | USA | USA | |
| POST OFFICE Post Office Address | City | State or Country | Zip Code |
| ADDRESS 21 MARINA VISTA, | LARKSPUR | CALIFORNIA | 94939 |

Date 5/2/97

Dov Michaeli
Signature of Inventor

| FULL NAME OF FIFTH JOINT INVENTOR, IF ANY | Last Name | First Name | Middle Name |
|---|----------------------------|--------------------------|------------------------|
| | WATSON | SUSAN | A. |
| RESIDENCE | City | State or Foreign Country | Country of Citizenship |
| & CITIZENSHIP | NOTTINGHAM, UNITED KINGDOM | | UNITED KINGDOM |
| POST OFFICE | Post Office Address | City | State or Country |
| ADDRESS #5 SEATOLLA CLOSE, EDWALTON, NOTTINGHAM, UNITED KINGDOM | | | Zip Code |
| | | | NG2 6RB |

Date

Signature of Inventor

Check proper box(es) for any added page(s) forming a part of this declaration

___/ Signature for subsequent joint inventors.

Number of pages added _____.

___/ Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor.

Number of pages added _____.

___/ Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR 1.47.

Number of pages added _____.

COMBINED DECLARATION
AND POWER OF ATTORNEY
(Original, Design, National Stag of PCT or CIP Application)

As a below named inventor, I hereby declare that:
My residence, post office address and citizenship are as stated below
next to my name, I believe I am the original, first and sole inventor
(if only one name is listed below) or an original, first and joint
inventor (if plural names are listed below) of the subject matter which
is claimed and for which a patent is sought on the invention entitled:

IMMUNOLOGICAL METHODS FOR THE TREATMENT OF GASTROINTESTINAL CANCER
the specification of which: (complete (a), (b) or (c) for type of application)

Regular or Design Application

- (a) _____ is attached hereto.
(b) X was filed on February 7, 1997 as Application
Serial No. 08/798,423 and was amended on
_____ (if applicable).

PCT Filed Application Entering National Stage

- (c) _____ was described and claimed in International Application No. _____ filed on _____ and amended on _____ (if any).

Acknowledgement of Review of Papers and Duty of Candor

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations § 1.56.

Priority Claim

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

- (d) x no such applications have been filed.
(e) — such applications have been filed as follows:

EARLIEST FOREIGN APPLICATION(S), IF ANY FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO SAID APPLICATION

| <u>Country</u> | <u>Appl. No.</u> | <u>Date of Filing</u> | <u>Date of Issue</u> | <u>Priority Claimed</u> |
|----------------|------------------|-----------------------|----------------------|-------------------------|
| | | | | () Yes () No |
| | | | | () Yes () No |
| | | | | () Yes () No |

ALL FOREIGN APPLICATION(S), IF ANY FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO SAID APPLICATION

| <u>Country</u> | <u>Appl. No.</u> | <u>Date of Filing</u> | <u>Date of Issue</u> | <u>Priority Claimed</u> |
|----------------|------------------|-----------------------|----------------------|-------------------------|
| | | | | () Yes () No |
| | | | | () Yes () No |
| | | | | () Yes () No |

I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States provisional application(s) listed below.

60/011,411
(Application Number)

02/08/96
(Filing Date)

(Application Number)

(Filing Date)

Continuation-in-Part

(complete this part only if this is a continuation-in-part application)
I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which occurred between the filing date of the prior application and the national or PCT International filing date of this application:

| <u>(Application Serial No.)</u> | <u>(Filing Date)</u> | <u>(Status)</u> | <u>(patented, pending,</u> |
|---------------------------------|----------------------|-----------------|----------------------------|
|---------------------------------|----------------------|-----------------|----------------------------|

Power of Attorney

As a named inventor, I hereby appoint Edward V. Filardi, Reg. No. 25,757; Nels Lippert, Reg. No. 25,888; Robert B. Smith, Reg. No. 28,538; David Bender, Reg. No. 35,445; Dimitrios Drivas, Reg. No. 32,218; Cecilia O'Brien Lofters, Reg. No. 33,434, Richard J. Sterner, Reg. No. 35,372; John Scheibeler, Reg. No. 35,346, Hans-Peter Hoffmann, Reg. No. 37,352, Scott T. Weingartner, Reg. No. 37,756 and Leslie Morioka, Reg. No. 40,304 the firm of WHITE & CASE, with offices at 1155 Avenue of the Americas, New York, New York 10036, as attorneys to prosecute this application and to transact all business in the Patent and Trademark office connected therewith.

SEND CORRESPONDENCE

TO: WHITE & CASE
Patent Department
1155 Avenue of the Americas
New York, NY 10036

DIRECT TELEPHONE CALLS TO:

Dimitrios T. Drivas, Esq.
WHITE & CASE
(212) 819-8286

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

| | | | |
|--|--|--------------------------|----------------------------|
| FULL NAME OF SOLE OR FIRST INVENTOR | Last Name GEVAS | First Name PHILIP | Middle Name C. |
| RESIDENCE | City | State or Foreign Country | Country of Citizenship |
| & CITIZENSHIP | HONOLULU, HAWAII | USA | USA |
| POST OFFICE ADDRESS | Post Office Address 487-A Portlock Rd., Honolulu, | City Hawaii | State or Country Hawaii |
| | | | Zip Code 96825 |

Date

Signature of Inventor

| FULL NAME OF SECOND JOINT INVENTOR, IF ANY | | Last Name | First Name | Middle Name |
|---|---------------------|--------------------------|------------------------|-------------|
| | | KARR | STEPHEN | L. |
| RESIDENCE | City | State or Foreign Country | Country of Citizenship | |
| & CITIZENSHIP | DAVIS, | CALIFORNIA | USA | |
| POST OFFICE | Post Office Address | City | State or Country | Zip Code |
| ADDRESS | 2265 HALSEY CIRCLE, | DAVIS | CALIFORNIA | 95616 |

June 3 1997
Date

Stephen L. Karr
Signature of Inventor

| FULL NAME OF THIRD JOINT INVENTOR, IF ANY | | Last Name | First Name | Middle Name |
|--|---------------------|--------------------------|------------------------|-------------|
| | | GRIMES | STEPHEN | |
| RESIDENCE | City | State or Foreign Country | Country of Citizenship | |
| & CITIZENSHIP | DAVIS | CALIFORNIA | USA | |
| POST OFFICE | Post Office Address | City | State or Country | Zip Code |
| ADDRESS | 551 RUTGERS DRIVE, | DAVIS | CALIFORNIA | 95616 |

3 June 1997
Date

Stephen Grimes
Signature of Inventor

| FULL NAME OF FOURTH JOINT INVENTOR, IF ANY | | Last Name | First Name | Middle Name |
|---|----------------------|--------------------------|------------------------|-------------|
| | | MICHAELI | DOV | |
| RESIDENCE | City | State or Foreign Country | Country of Citizenship | |
| & CITIZENSHIP | LARKSPUR, CALIFORNIA | USA | USA | |
| POST OFFICE | Post Office Address | City | State or Country | Zip Code |
| ADDRESS | 21 MARINA VISTA, | LARKSPUR | CALIFORNIA | 94939 |

5/2/97
Date

Dr. Michaeli
Signature of Inventor

| FULL NAME OF FIFTH JOINT INVENTOR, IF ANY | Last Name | First Name | Middle Name |
|---|----------------------------|--------------------------|------------------------|
| | WATSON | SUSAN | A. |
| RESIDENCE | City | State or Foreign Country | Country of Citizenship |
| & CITIZENSHIP | NOTTINGHAM, UNITED KINGDOM | | UNITED KINGDOM |
| POST OFFICE | Post Office Address | City | State or Country |
| ADDRESS #5 SEATOLLA CLOSE, EDWALTON, NOTTINGHAM, UNITED KINGDOM | | | Zip Code |
| | | | NG2 6RB |

Date

Signature of Inventor

Check proper box(es) for any added page(s) forming a part of this declaration

___/ Signature for subsequent joint inventors.

Number of pages added _____.

___/ Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor.

Number of pages added _____.

___/ Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR 1.47.

Number of pages added _____.

**COMBINED DECLARATION
AND POWER OF ATTORNEY**
(Original, Design, National Stag of PCT or CIP Application)

As a below named inventor, I hereby declare that:
My residence, post office address and citizenship are as stated below
next to my name, I believe I am the original, first and sole inventor
(if only one name is listed below) or an original, first and joint
inventor (if plural names are listed below) of the subject matter which
is claimed and for which a patent is sought on the invention entitled:

IMMUNOLOGICAL METHODS FOR THE TREATMENT OF GASTROINTESTINAL CANCER

the specification of which: (complete (a), (b) or (c) for type of
application)

Regular or Design Application

- (a) ___ is attached hereto.
(b) X was filed on February 7, 1997 as Application
Serial No. 08/798,423 and was amended on
_____ (if applicable).

PCT Filed Application Entering National Stage

- (c) ___ was described and claimed in International Application
No. _____ filed on _____ and amended on
_____ (if any).

Acknowledgement of Review of Papers and Duty of Candor

I hereby state that I have reviewed and understand the contents of
the above identified specification, including the claims, as amended
by any amendment referred to above.

I acknowledge the duty to disclose to the United States Patent and
Trademark Office all information known to me to be material to
patentability as defined in Title 37, Code of Federal Regulations
§ 1.56.

Priority Claim

I hereby claim foreign priority benefits under Title 35, United
States Code, §119 of any foreign application(s) for patent or
inventor's certificate listed below and have also identified below any
foreign application for patent or inventor's certificate having a
filing date before that of the application on which priority is
claimed.

(complete (d) or (e))

- (d) X no such applications have been filed.
(e) ___ such applications have been filed as follows:

EARLIEST FOREIGN APPLICATION(S), IF ANY FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO SAID APPLICATION

| <u>Country</u> | <u>Appl. No.</u> | <u>Date of Filing</u> | <u>Date of Issue</u> | <u>Priority Claimed</u> |
|----------------|------------------|-----------------------|----------------------|-------------------------|
| | | | | () Yes () No |
| | | | | () Yes () No |
| | | | | () Yes () No |

ALL FOREIGN APPLICATION(S), IF ANY FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO SAID APPLICATION

| <u>Country</u> | <u>Appl. No.</u> | <u>Date of Filing</u> | <u>Date of Issue</u> | <u>Priority Claimed</u> |
|----------------|------------------|-----------------------|----------------------|-------------------------|
| | | | | () Yes () No |
| | | | | () Yes () No |
| | | | | () Yes () No |

I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States provisional application(s) listed below.

60/011,411
(Application Number)

02/08/96
(Filing Date)

(Application Number)

(Filing Date)

Continuation-in-Part

(complete this part only if this is a continuation-in-part application)
I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which occurred between the filing date of the prior application and the national or PCT International filing date of this application:

| <u>(Application Serial No.)</u> | <u>(Filing Date)</u> | <u>(Status)</u> | <u>(patented, pending,</u> |
|---------------------------------|----------------------|-----------------|----------------------------|
|---------------------------------|----------------------|-----------------|----------------------------|

Power of Attorn y

As a named inventor, I hereby appoint Edward V. Filardi, Reg. No. 25,757; Nels Lippert, Reg. No. 25,888; Robert B. Smith, Reg. No. 28,538; David Bender, Reg. No. 35,445; Dimitrios Drivas, Reg. No. 32,218; Cecilia O'Brien Lofters, Reg. No. 33,434, Richard J. Sterner, Reg. No. 35,372; John Scheibeler, Reg. No. 35,346, Hans-Peter Hoffmann, Reg. No. 37,352, Scott T. Weingartner, Reg. No. 37,756 and Leslie Morioka, Reg. No. 40,304 the firm of WHITE & CASE, with offices at 1155 Avenue of the Americas, New York, New York 10036, as attorneys to prosecute this application and to transact all business in the Patent and Trademark office connected therewith.

SEND CORRESPONDENCE

TO: WHITE & CASE
Patent Department
1155 Avenue of the Americas
New York, NY 10036

DIRECT TELEPHONE CALLS TO:

Dimitrios T. Drivas, Esq.
WHITE & CASE
(212) 819-8286

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

| | | | |
|--|-------------------------------|--------------------------|------------------------|
| FULL NAME OF SOLE OR FIRST INVENTOR | Last Name GEVAS | First Name PHILIP | Middle Name C. |
| RESIDENCE | City | State or Foreign Country | Country of Citizenship |
| & CITIZENSHIP | HONOLULU, HAWAII | USA | USA |
| POST OFFICE | Post Office Address | City | State or Country |
| ADDRESS | 487-A Portlock Rd., Honolulu, | Hawaii | Zip Code |
| | | | 96825 |

Date

Signature of Inventor

| | | | |
|------------------------|---------------------|--------------------------|------------------------|
| FULL NAME OF SECOND | Last Name | First Name | Middle Name |
| JOINT INVENTOR, IF ANY | KARR | STEPHEN | L. |
| RESIDENCE | City | State or Foreign Country | Country of Citizenship |
| & CITIZENSHIP | DAVIS, | CALIFORNIA | USA |
| POST OFFICE | Post Office Address | City | State or Country |
| ADDRESS | 2265 HALSEY CIRCLE, | DAVIS | CALIFORNIA |
| | | | 95616 |

Date

Signature of Inventor

| | | | |
|------------------------|---------------------|--------------------------|------------------------|
| FULL NAME OF THIRD | Last Name | First Name | Middle Name |
| JOINT INVENTOR, IF ANY | GRIMES | STEPHEN | |
| RESIDENCE | City | State or Foreign Country | Country of Citizenship |
| & CITIZENSHIP | DAVIS | CALIFORNIA | USA |
| POST OFFICE | Post Office Address | City | State or Country |
| ADDRESS | 551 RUTGERS DRIVE, | DAVIS | CALIFORNIA |
| | | | 95616 |

Date

Signature of Inventor

| | | | |
|------------------------|---------------------|--------------------------|------------------------|
| FULL NAME OF FOURTH | Last Name | First Name | Middle Name |
| JOINT INVENTOR, IF ANY | MICHAELI | DOV | |
| RESIDENCE | City | State or Foreign Country | Country of Citizenship |
| & CITIZENSHIP | LARKSPUR, | CALIFORNIA | USA |
| POST OFFICE | Post Office Address | City | State or Country |
| ADDRESS | 21 MARINA VISTA, | LARKSPUR | CALIFORNIA |
| | | | 94939 |

Date

Signature of Inventor

| FULL NAME OF FIFTH JOINT INVENTOR, IF ANY | Last Name | First Name | Middle Name |
|---|----------------------------|--------------------------|------------------------|
| | WATSON | SUSAN | A. |
| RESIDENCE | City | State or Foreign Country | Country of Citizenship |
| & CITIZENSHIP | NOTTINGHAM, UNITED KINGDOM | | UNITED KINGDOM |
| POST OFFICE | Post Office Address | City | State or Country |
| ADDRESS #5 SEATOLLA CLOSE, EDWALTON, NOTTINGHAM, UNITED KINGDOM | | | Zip Code |
| | | | NG2 6RB |

27/5/97
Date

S.A. Watson
Signature of Inventor

Check proper box(es) for any added page(s) forming a part of this declaration

☐ / Signature for subsequent joint inventors.

Number of pages added _____.

☐ / Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor.

Number of pages added _____.

☐ / Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR 1.47.

Number of pages added _____.